CSD 1149 [O	08/28/14] , Telephone No. & I.D. No.	_						
тп	NITED STATES BANKRUPTCY COURT	1						
	SOUTHERN DISTRICT OF CALIFORNIA "F" Street, San Diego, California 92101-6991							
In Re								
		BANKRUPTCY NO.						
Tax I.D.(EIN)	#:/S.S.#:XXX-XX Debtor.							
□ c	NOTICE OF HEARING AND MOTION FO HAPTER 11 DISCLOSURE STATEMENT CHA	OR APPROVAL OF IAPTER 11 PLAN OF REORGANIZATION						
□ c	HAPTER 11 MODIFIED PLAN	APTER 13 MODIFIED PLAN						
TO THE DEB	TOR, ALL CREDITORS AND OTHER PARTIES IN INTERE	EST:						
	ARE HEREBY NOTIFIED that on							
	of the Jacob Weinberger United States Courthouse, locate	_	118					
92101-6991, t	here will be a hearing regarding the Motion of							
for [check the	appropriate box]:							
[ ]	Approval of disclosure statement in chapter 11 case;							
[ ]	[ ] Approval of plan of reorganization in chapter 11 case;							
[ ]	[ ] Modification of a chapter 11 plan prior to confirmation; or							
[ ]	Modification of a chapter 13 plan after confirmation.							
If not	required to be attached, a set of the moving papers will be	be provided, upon request, by the undersigned	10					
may be inspec	cted at the office of the Clerk.							
Any o	pposition or other response to the motion must be served	d upon the undersigned and the original and o	ne					
copy of such	papers with proof of service must be filed with the Clerk of	of the U.S. Bankruptcy Court at 325 West "F" S	۶t.,					
San Diego, C	alifornia 92101-6991, NOT LATER THAN TWENTY-EIGH	HT (28) <sup>1</sup> DAYS FROM THE DATE OF SERVIC	;Ε.					
DATED:								

<sup>[</sup>Attorney for] Moving Party

<sup>1</sup>If you were served electronically or by mail, you have three (3) additional days to take the above-stated actions as calculated by Fed. R. Bankr. P. 9006(f).

CSD 1149

## **CERTIFICATE OF SERVICE**

	I, the undersigned whose address appears below, certify:						
	That I am, and at all times hereinafter mentioned was, more than 18 years of age;						
HEAR	That on day of ING AND MOTION FOR APPROV	/AL by [describe here r	, I served mode of service]	a true	copy of the within NOTICE OF		
on the	following persons [set forth name	and address of each p	erson served] and	d/or as	checked below:		
[ ]	Attorney for Debtor (if required):						
. 1	For Chpt. 7, 11, & 12 cases: [ ]	For ODD numbered Chapter	13 cases:	[ ]	For EVEN numbered Chapter 13 cases:		
. 1	UNITED STATES TRUSTEE	THOMAS H. BILLINGSLEA,		. ,	DAVID L. SKELTON, TRUSTEE		
	Department of Justice 402 West Broadway, Suite 600 San Diego, CA 92101	401 West "A" Street, Suite 16 San Diego, CA 92101	680		525 "B" Street, Suite 1430 San Diego, CA 92101-4507		
	I certify under penalty of perjury	that the foregoing is tru	ue and correct.				
	Executed on						
	Executed on(Date)		(Typed Name a	nd Sigi	nature)		
			(Address)				
			(City, State, ZIP Code)				